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Date: March 28, 2006

To: Examiner Chism, Billy Dell	Fax: (571) 273-8300	<input type="checkbox"/> Use this fax number only
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From: Pamela J. Sherwood	Phone: (650) 833-7790	Return Fax: (650) 327-3231
Original: <input checked="" type="checkbox"/> To follow via Express Mail sent: 03-28-2006		
Fax Contains: <u>59</u> pages (<i>including this sheet</i>). If incomplete, please call Susan M. Alessi at (650) 833-7714.		
Message: <p style="margin-top: 10px;">As we discussed last week, attached please find a courtesy copy of an RCE filed for the above identified application.</p>		

Ref: STAN-299

Return Original to: Susan M. Alessi

Location:

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PTO/SB/17 (12-04)

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FEE TRANSMITTAL For FY 2005		Complete If Known	
		Application Number	10/818,720
		Filing Date	April 1, 2004
		First Named Inventor	NUSSE, ROELAND
		Examiner Name	CHISM, BILLY DELL
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1654
TOTAL AMOUNT OF PAYMENT	(\$ 526)	Attorney Docket No.	STAN-299

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0815 Deposit Account Name: Bozicevic, Field and Francis LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee				
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments				

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	Small Entity	Fee (\$)	Fee (\$)
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100	50
Multiple dependent claims	360	180	25

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee (\$)
- 20 or HP =	x	=			
HP = highest number of total claims paid for, if greater than 20					

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee (\$)
- 3 or HP =	x	=			
HP = highest number of independent claims paid for, if greater than 3					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)
 for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

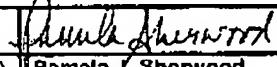
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: RCE fee 4 petition fee

\$525-

SUBMITTED BY					
Signature			Registration No. (Attorney/Agent)	36,677	
Name (Print/Type)	Pamela J. Sherwood		Telephone (650) 327-3400		
Date 03/28/2008					

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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